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Substitute for Form PTO-875										
CLAIMS AS FILED - PART I (Column 1) (Column 2)						· SMALL E	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
	IC FEE OFR 1.16(a))						s	OR		s
	AL CLAIMS CFR 1,16(c))		minus 20	= .		x \$ =		OR	x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		AS .	minus 3 =			x s =		OR	x \$ =	
÷		NT CLAIM PRESEN				+ s =		OR	+ s =	
* If the difference in column 1 is less than zero, enter "0" in column 2.										
- 17 1	ne difference in c	1			TOTAL		OR	TOTAL		
CLAINS AS AMENDED - PART II										
	0126	(Carren 1)		(Column 2)	(Column 3)	SMALL 8	ENTITY	OR	OTHER SMALL	R THAN ENTITY
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONAL FAE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(e))	19	Minus	-90	=	x s=		OR	x s=	
	Independent (37 CFR 1.16(b))	3	Minus	<b>"</b> 5	=	x \$=		OR	x s=	
AN	FIRST PRESENT	ATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	+\$		OR	+\$ =	
						TOTAL ADD' FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Calumn 2)	(Calumn 2)	ADDITE	ł.,	, 0.11	ADDEFEE	
~		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	· <del>/</del>				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	='	x \$=		OR	x s=	
	Independent (37 CFR 1.16(b))		Minus	***	=	x s=		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+s =		OR	+ \$ =		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)			ì		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x s =		OR	x s=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =		OR	+ \$ =	
TOTAL ADD'L FI								OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is govered by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, All kandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Pexandria, VA 22313-1450.